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SERIAL NUMBER 10/694,944	FILING DATE 10/29/2003 RULE	CLASS 606	GROUP ART UNIT 3731	ATTORNEY DOCKET NO. P1237
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APPLICANTS

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** CONTINUING DATA *****

None ELS

** FOREIGN APPLICATIONS *****

None ELS

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/05/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>9/11/04</u> Examiner's Signature <u>SL</u> Initials	STATE OR COUNTRY MA	SHEETS DRAWING 10	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 2
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ADDRESS

28390
MEDTRONIC VASCULAR, INC.
IP LEGAL DEPARTMENT
3576 UNOCAL PLACE
SANTA ROSA, CA
95403

TITLE

Distal protection device for filtering and occlusion

FILING FEE RECEIVED 970	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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